** O\*H\*I\*O MASTERS 2020 PENTATHLON (SCY) SWIM MEET**

 **AKRON GENERAL HEALTH & WELLNESS CENTER - NORTH**

 **4300 Allen Road, Stow, Ohio 44224**

**Sunday, November 1, 2020**

 **USMS SANCTION: # 180-S004**

**DATES** Sunday, November 1, 2020 **-** Warm-ups: 9:00 a.m. **Deck entries until 9:30 a.m**. Meet: 10:00 a.m.

**POOL** The natatorium is a premier facility built in 2007. The pool has six lanes (25 yards) with anti-turbulent lane lines along with a spa and leisure pool. It is used by the Stow-Munroe Falls High School Swim Team along with the O\*H\*I\*O Masters Akron General workout group. Five of the six lanes will be used for the meet with the sixth lane available for warm ups and cool downs. The length of the competition course without a bulkhead is in compliance and on file with USMS in accordance with articles 105.1.7 and 106.2.1. The primary timing system will be a Colorado 5 automatic timing system with touchpad finishes. Times may be submitted for USMS records and USMS Top 10 times.

**LOCATION** The natatorium is part of a state of the art, 96,400 square foot fitness and health center. A good description of this facility is found at [www.aquaticsintl.com/2008/dreamdesigns/akron.html](http://www.aquaticsintl.com/2008/dreamdesigns/akron.html).

Directions from Route 8 South: Traveling on Route 8 South, exit at Steels Corners Road. Take a left and go over the bridge. Turn left on Allen Road. The Health & Wellness Center is located at 4300 Allen Road.

Directions Traveling on Route 8 North: Exit at Steels Corners Road. Take a right. Turn left on Allen Road.

Directions from 77 South/North: Traveling on 77, merge onto Route 8 North. On Route 8 North, exit at Steels Corners Road. Take a right. Turn left on Allen Road.

From 271 South: Traveling on 271 South, exit to Route 8 South. Follow Route 8 South. Directions Above

**ELIGIBILITY** 2020 U.S. Masters Swimming rules will govern conduct of the meet. Because of insurance requirements, all swimmers must be registered with U.S. Masters Swimming for 2020. If not registered, swimmers can register online with USMS after the entry due date or at the meet, but swimmers must be USMS registered before swimming any events. The USMS Release of Liability must be signed electronically during online meet entry or must be signed on paper for mailed entries. Please provide a copy of your USMS card with mailed entries.

**DEADLINES** Online registration is offered on ClubAssistant.com. Online entries will close at **NOON** **on Saturday, October 31,** 2020. **Paper entries must be received by the Meet Director by Wednesday, October 28, 2020**. Deck entries will be accepted until **9:30 a.m**. on November 1, 2020.

**ENTRIES**  **ONLINE ENTRIES PAPER ENTRIES**

**FEES $30.00 prior to 11:59, Oct. 24, 2020 $35.00 Mail in entry**

 **$35.00 Sunday, Oct. 25, 2020 to noon, Saturday, Oct. 31, 2020 $10.00 Relay only swimmer**

 **$40.00 All deck entries**

 **NOTE:** Swimmers age 80 and over can enter for free. These swimmers must use the mail in form.

 Online entries are paid by credit card to ClubAssistant.com and your credit card will be charged by "ClubAssistant.com Event Billing" for this swim meet. For mailed entries, make checks payable to **O\*H\*I\*O Masters Swim Club** and mail to **Meet Director, P.O. Box 43824, Cleveland, Ohio 44143.** Online entries are cost effective and strongly recommended.

**AGE GROUPS** Age of competitor on November 1, 2020 will determine age group. Age groups are: 18-24, 25-29, 30-34, ..., 80-84

 85-89, etc. For relays: age group is determined by the age of the youngest swimmer: 18+, 25+, 35+, 45+, etc.

**AWARDS** To be eligible for the pentathlon award, swimmer must compete in all 5 of the mini, all 5 of the maxi or all 5 of the

freestyle pentathlon events. There will be a pentathlon award given for each age and gender group based on a total

time in the 5 events. Ribbons will be given for those who want them for individual events and who do not win the

pentathlon. Results will be posted on www.ohiomasters.com usually within a day or two.

**SEEDING** Heats formed by submitted times, regardless of age or sex, and progress from fast to slow.

**MAIL IN ENTRY FORM**

**O\*H\*I\*O MASTERS PENTATHLON SWIM MEET - SHORT COURSE 25 YARDS**

**AKRON GENERAL HEALTH & WELLNESS CENTER - NORTH**

**November 1, 2020**

**USMS SANCTION: # 180-S004**

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SEX \_\_\_ AGE on Nov. 1, 2020 \_\_\_\_\_ BIRTHDATE \_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_ ZIP \_\_\_\_\_\_\_

PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TEAM \_\_\_\_\_\_\_ or Unattached \_\_\_\_ USMS #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (with copy of card)

Enter one Pentathlon Event - either the Mini-Pentathlon (50’s with the 100 yard IM) or the Maxi-Pentathlon (100’s with the 200 yard IM), or the Freestyle Pentathlon (all 5 freestyle events). You can also swim individual events if you do not wish to swim the Pentathlon. (maximum of 6 events). Please enter seed times or "No Time" for each of your events.

|  |  |
| --- | --- |
|   | **Enter your SEED TIME (Best Guess) or NO Time in the appropriate column** |
| # |  **EVENT** | **MINI****PENTATHLON** | **MAXI****PENTATHLON** | **FREESTYLE** **PENTATHLON** |
| 1 | 500 FREESTYLE |  |  |  |
| 2 | 200 INDIVIDUAL MEDLEY |  |  |  |
| 3 | 100 INDIVIDUAL MEDLEY |  |  |  |
| 4 | 25 FREESTYLE |  |  |  |
|  | **15 MINUTE BREAK / WARM UP**  |
| 5 | 100 BUTTERFLY |  |  |  |
| 6 | 50 BUTTERFLY |  |  |  |
| 7 |  200 FREESTYLE |  |  |  |
| 8 | 50 BACKSTROKE |  |  |  |
| 9 | 100 BACKSTROKE |  |  |  |
|   |  **15 MINUTE BREAK / WARM UP** |
| 10 | 50 FREESTYLE |  |  |  |
| 11 | 100 BREASTSTROKE |  |  |  |
| 12 | 50 BREASTSTROKE |  |  |  |
| 13 | 100 FREESTYLE |  |  |  |
|  | **10 MINUTE BREAK / WARM UP** |
| 14 | 200 MEDLEY RELAY | Enter relays at the meet. |
| 15 | 400 MEDLEY RELAY |

**ENTRY FEES:** Paper Entry $35.00 = \_\_\_\_\_\_\_

 Deck Entries $40.00 = \_\_\_\_\_\_\_

 Relay only swimmers $10.00 = \_\_\_\_\_\_\_

□ I am a swimmer 80 years of age or over and am entering the swim meet at no cost.

□ This is my first time entering a U.S. Masters Swim Meet. Please select t-shirt size below.

 □ Medium

 □ Large

 □ Extra Large

**Deadline: Deadline for Online Entries is Noon, Saturday, October 31, 2020. Paper entries must be received by Wednesday, October 28, 2020.** For paper entries make checks payable to: **O\*H\*I\*O MASTERS SWIM CLUB.** Mail to: Meet Director, P.O. Box 43824, Cleveland, Ohio 44143

**Please read and sign the “Participant Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement” on the next page.**

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sanctioned by Lake Erie LMSC for USMS,Inc. # **180-S004**

 **PARTICIPANT WAIVER AND RELEASE OF LIABILITY,**

**ASSUMPTION OF RISK AND INDEMNITY AGREEMENT**

For and in consideration of United States Masters Swimming, Inc. (“USMS”) allowing me, the undersigned, to participate in any USMS sanctioned or approved activity, including swimming camps, clinics, and exhibitions; learn-to-swim programs; swimming tryouts; fitness and training programs (including dryland training); swim practices and workouts (for both pool and open water); pool meets; open water competitions; local, regional, and national competitions and championships (both pool and open water); and related activities (“Event” or “Events”); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the “Agreement”);

1. I hereby certify and represent that (i) I am in good health and in proper physical condition to participate in the Events; and (ii) I have not been advised of any medical conditions that would impair my ability to safely participate in the Events**.** I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the Events.
2. I acknowledge the inherent risks associated with the sport of swimming. I understand that my participation involves risks and dangers, which include, without limitation, the potential for serious bodily injury, sickness and disease, permanent disability, paralysis and death (from drowning or other causes); loss of or damage to personal property and equipment; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with natural or manmade objects; dangers arising from adverse weather conditions; imperfect water conditions; water and surface hazards; facility issues; equipment failure; inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the Event organizers; and other undefined, not readily foreseeable and presently unknown risks and dangers (“Risks”). I understand that these Risks may be caused in whole or in part by my own actions or inactions, the actions or inactions of others participating in the Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby expressly assume all such Risks and responsibility for any damages, liabilities, losses or expenses that I incur as a result of my participation in any Events.
3. I agree to be familiar with and to abide by the Rules and Regulations established by USMS, including any safety regulations. I accept sole responsibility for my own conduct and actions while participating in the Events.
4. I hereby Release, Waive and Covenant Not to Sue, and further agree to Indemnify, Defend and Hold Harmless the following parties: USMS, its members, clubs, workout groups, event hosts, employees, and volunteers (including, but not limited to, event directors, coaches, officials, judges, timers, safety marshals, lifeguards, and support boat owners and operators); the USMS Swimming Saves Lives Foundation; USMS Local Masters Swimming Committees (LMSCs); the Event organizers and promoters, sponsors and advertisers; pool facility, lake and property owners or operators hosting the Events; law enforcement agencies and other public entities providing support for the Events; and each of their respective parent, subsidiary and affiliated companies, officers, directors, partners, shareholders, members, agents, employees, and volunteers (individually and collectively**,** the “Released Parties**”**), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense (including court costs and reasonable attorneys’ fees) of any kind or nature (“Liability”) which may arise out of, result from, or relate in any way to my participation in the Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.
5. I further agree that if, despite this Agreement, I, or anyone on my behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities which any may be incurred as the result of such claim.

I hereby warrant that I am of legal age and competent to enter into this Agreement, that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up substantial legal rights by signing it (including the rights of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns), acknowledge that I have signed this Agreement without any inducement, assurance, or guarantee, and intend for my signature to serve as confirmation of my complete and unconditional acceptance of the terms, conditions and provisions of this Agreement. This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements, or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Last Name | First Name | MI | Sex (circle) M F | Date of Birth (mm/dd/yy) |
| Street Address, City, State, Zip |
| Signature of Participant | Date Signed |